

**LOS ANGELES COUNTY – DEPARTMENT OF MENTAL HEALTH
SERVICE AREA 6**

Type of Meeting	Service Area 6 Quality Improvement / Quality Assurance Council	Date	02/25/2016	
Place	12021 Wilmington Ave Los Angeles CA 90059	Start Time:	9:00am	
Chairperson	Aprill Baker	End Time:	11:00am	
Members Present	Ahmad Kausar, Andy Vigil, Anna Yee, Aqila Armstrong, Elizabeth Echeverria, Fabiola Cordova, Jennifer Phan, Jose Haro, Julie Elder, Kanisha McReynolds, Karalee Bechtol, Kevin Frank, Kim Farnham, Kumiko Tsuda, Lily Fowler, Linah Zayed, Lisa Heemer, Lynetta Gore, Marcela Dioses, Marianne Callahan, Mahima Mohan, Marietta Watson, Martin McDermott, Mimi Nguyen, Rashauna Fair, Reyna Diaz, Rosary Woods, Sherrie Yu, Shronda Givens, Silvia Simental, Socorro Gertmenian, Thang Nguyen, Yovette Roldan			
Agenda Item & Presenter	Discussion and Findings		Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
Call to Order & Introductions	The meeting was called to order.		Introductions were made	A. Baker
Review of Minutes	The January 2016 QIC meeting minutes were reviewed.		Minutes were approved	A. Baker


Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	Person Responsible
<p>QUALITY IMPROVEMENT</p> <p>Clinical OMD</p>	<p>Chair presented info on Department Peer Review which looked at adult BMI for clients on antipsychotic medication and reviewed health monitoring parameters. Also looked at whether medication consents were done. QIC held discussion on Agency Peer review processes and the challenges associated when doing QI with psychiatrists who are contracted and have limited hours.</p> <p>TAR form updated for DSM5 (for clients under 18 on psychotropic meds)</p> <p>Training in April (date TBA) on psychotropic medication with children for non-prescribers</p>	<p>QIC membership provided feedback to each other on systems used to address some of the challenges experienced with psychiatrist, ie the use of dictation services to ensure progress notes are done, efforts to increase communication between therapists and psychiatrists, one on one meeting with psychiatrists when possible.</p>	<p>A. Baker</p>
<p>QI Project Update</p>	<p>Discussed CSEC (clinical) and VANS (nonclinical) PIP planned for 2016. Clinicians trained through TAY Division on CSEC were asked pre-training questions on recognizing and assessing clients for CSEC. This year will be looking at how we track CSEC clients. TAY sending request to contract provider clinicians for list of clients identified as CSEC.</p> <p>VANS (Vacancy adjustment system) - rolled out in SA4 and getting ready to implement in SA 6 & 8.</p>	<p>Providers were information that QI department will also be making efforts to contact clinicians who participated in the CSEC training in order to obtain requested feedback.</p>	<p>L. Gore</p>

<p>Patients Rights Office</p>	<p>QIC were advised that Grievance and Appeal report for state has finalized. 421 grievances, primarily quality of care issues.</p> <p>New consumer resource handbook 2016 edition online as of Friday afternoon ****</p> <p>QIC Chair logged onto the internet and walked committee through the process of creating a secure ID using the Cisco system, which is the secure email system used by LACDMH. Members have the option to create an account and begin sending COP logs to PRO via email.</p>	<p>Chair advised members to please confirm with their CEO's and IT departments before creating about creating an account prior to doing so. QIC members who already use Cisco secure email provided feedback on alternate ways to log-in and use the system.</p>	<p>A. Baker</p>
<p>POLICY UPDATES</p>	<p>Initial appointment and initial medication appt policies are being combined into one (302.07)</p>		<p>A. Baker</p>
<p>EQRO</p>	<p>Committee were advised that LACDMH External Quality Review Organization Review will be April 25th – April 29th. SA 4 and 6 have been chosen to participate. Additional information will be provided as it's</p>		<p>A. Baker</p>

<p>QUALITY ASSURANCE</p> <p>DHCS Update</p>	<p>Chair advised committee that DHCS Chart review is currently being held through March 3, 2016. Exit Conference will be March 4th, providers with charts selected are invited to attend. QIC members were given Section K of the Annual Review Protocol, the tool used by DHCS in conducting their review. Committee held discussion on the use of ARP and other audit tools. Members shared their experience with Section K of ARP. Members expressed the tool is very detailed which creates some challenges with it being implemented on a regular basis, as is required with QA Review.</p>	<p>Handout provided.</p> <p>Several members shared that their agency has created their own review tool. Chair suggested members share tool with committee and consider creating a tool that will incorporate all necessary elements without becoming too cumbersome.</p>	<p>A. Baker</p>
<p>Training and Operations</p>	<p>Schedule of Trainings was provided. Providers were reminded to submit any late QA protocols or Quarterly QA Reports</p>	<p>Handout provided</p>	<p>A. Baker</p>
<p>Policy and Technical Development</p>	<p>Final QA Bulletin 16-02 – System and Chart Review was reviewed. QIC members were advised about the Office of the Inspector General (OIG) Review that LACDMH is scheduled for. OIG will be auditing 43 counties in California - 500 claims pulled from across the state. LA expects about 150 of those. Unclear if it's both inpatient and outpatient. OIG will compare their results with state disallowance findings (last state review LAC had 27% disallowance rate, lower than state rate of 36%).</p>	<p>Handouts provided.</p> <p>Members will be notified when OIG review has been scheduled and additional information is provided by QAD</p>	<p>A. Baker</p>

Health Information Management (HIM)	<p>Service Request Log (Draft Clinical Forms Bulletin) is being modified to include incorporating universal screening elements, e.g., adding in reason for request, legal guardian info, emergent medication needs (and if so, is med appt scheduled same day as initial appt?), is client aware of request if not being made by client themselves. Membership were informed that their EHR must also be able to capture this data. LACDMH goal is to track # of days between date of request and date of initial appointment per state and federal requirements</p> <p>Members reminded that the NOA-E needs to be issued if agency isn't able to get clients seen during the required timeframe. New Access to Care policy coming out (will replace initial clinical and initial med appointment policies).</p> <p>DHCS has issued a revision to state plan amendment to add in therapeutic foster care services to the plan.</p> <p>HIM has reported issue with duplicate records, corrupt data. Clinics/providers encouraged to set up oversight systems to ensure client registration data entry is accurate and clean.</p>	Handout provided. Final Bulletins will be provided when available.	A. Baker
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Agenda Item & Presenter	Discussion & Findings	Decisions, Recommendations, Actions, & Scheduled Tasks	
Medi-Cal Certification	No updates		T. Nguyen
Open Agenda	N/A		
Announcements	N/A		
Next Meeting	March 24, 2016		A. Baker

Respectfully Submitted, 
Aprill Baker, QIC Chair

Date 3-28-16